



Santipur RAGINI

(Estd. 2005)

Reg. No. S/1L/43668

Kashyap Para, Santipur, Nadia (W.B.)

FORM FOR LISTENING / LEARNING CLASS & MUSIC WORKSHOP

Name of the Applicant (in capital letters) : _____

Name of the School: _____

Class: _____

Date of Birth (dd/mm/yy): _____ Sex : Male / Female

Mail Address : _____

Contact No. : _____

Willing to participate in : *Learning Eng / Math / Drawing / Tabla / Music Class / Music Workshop*
/ Listening Music Class. [Put a tick to suggest your choice]

Agreement : **I'll abide by the rules and regulations of the organization and co-operate to run the activities smoothly.**

Date: _____

Signature of the Applicant:

Signature of the Guardian

Signature of the President / Secretary.

***Santipur* RAGINI**

***Santipur* RAGINI** Kashyap Para, Santipur, Nadia (W.B.).
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